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## Congress of the United States House of Representatives Washington, DC 20515-0512

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COMMITTEE ON ARMED SERVICES

SUBCOMMITTEES:

OVERSIGHT AND INVESTIGATION

COMMITTEE ON OVERSIGHT AND GOVERNMENT REFORM

SUBCOMMITTEES:
RANKING MEMBER, ENERGY POLICY, HEALTH CARE,
AND ENTITLEMENTS
NATIONAL SECURITY

GUN VIOLENCE PREVENTION TASK FORCE Vice Chair

The Honorable Darrell Issa Chairman House Committee on Oversight and Government Reform 2157 Rayburn House Office Building Washington, DC 20515

## Dear Chairman Issa:

I am writing to ask for the committee to hold a hearing to investigate the electronic cigarette, or e-cigarette, industry. The e-cigarette industry has seen exponential growth in recent years. New reports raise serious concerns about the lack of federal regulation and oversight of the industry. The serious public health and safety risks warrant the committee's immediate attention as part of its mission and jurisdiction over food and drug safety and to conduct legitimate oversight of federal agencies.

Our committee has already set a precedent by working together in a bipartisan manner, across committees, to investigate, carry, and pass legislation regulating the tobacco industry. In 2008, Chairman Henry Waxman (D-CA) and Ranking Member Tom Davis (R-VA) worked with the House Energy and Commerce Committee to pass the Family Smoking Prevention and Tobacco Control Act, which became law in June of 2009. This landmark legislation gave the U.S. Food and Drug Administration the authority to regulate the manufacturing, distribution, and marketing of tobacco products to protect public health. E-cigarettes represent the next major tobacco related public safety frontier, and the committee should continue this bipartisan tradition by holding a hearing to investigate this sector.

As you may know, e-cigarettes are designed to simulate the act of smoking tobacco by producing a flavored aerosol that looks and feels like tobacco smoke without burning tobacco leaves. Although e-cigarettes do not produce tobacco smoke, they still contain nicotine, and the vapor that is expelled contains known carcinogens and toxic chemicals such as diethylene glycol and nitrosamines. The vaporizing mechanism itself also produces potentially toxic metal nanoparticles. But unlike tobacco cigarettes, e-cigarettes are not regulated by the FDA. As a result, there is no transparency, uniformity, or standards as to the contents of e-cigarettes or limits on the amount of ingredients that should be used.

According to the Centers for Disease Control and Prevention (CDC) about 1 in 5 adult smokers, or 21 percent, have tried an e-cigarette in 2011 – this number is up from about 10 percent in 2010. The CDC also found that e-cigarette use by middle and high school students more than

doubled from 2011 to 2012. As usage levels rise, the risk to the public grows. Exposure to the concentrated amounts of the chemicals that go into e-cigarettes, either via ingestion or absorption, can cause seizures, arrhythmia, vomiting, diarrhea, and even death. And a recent *New York Times* article highlighted the fact that nationwide, the number of poison control center cases and the number of cases referred to hospitals linked to e-cigarettes tripled between 2012 and 2013.

Studying state statistics of poisoning cases related to e-cigarettes brings additional concerns regarding the potential impact and health risks for children. In 2013, the Oklahoma Poison Control Center received 77 calls regarding e-cigarette related poisoning – a dangerous increase from the 1 call the center received in 2010. In the first two months of 2014, all but two of the 25 cases reported in Oklahoma involved children ages 4 and under. Just last month, a 2 year-old girl in Oklahoma City was rushed to an emergency room after drinking a small bottle of e-cigarette nicotine liquid. In Minnesota, the poison control center there reported that 29 of the 74 e-cigarette poising cases reported in 2013 involved children ages 2 and under. Adults are at risk as well. For example, a woman in Kentucky was admitted to the hospital after her e-cigarette broke in bed and caused cardiac problems when the e-liquid was absorbed through her skin.

To date the FDA has said it plans to regulate e-cigarettes, however, action has been slow to materialize. In the meantime, some states have started to address the issue. Mr. Chairman, our state of California is ahead of the curve here. In my district, the San Francisco Board of Supervisors unanimously voted on March 19 to treat e-cigarettes as regular cigarettes. This will have the effect of banning e-cigarettes from bars, restaurants, and businesses, and will require sellers to acquire a special permit. E-cigarettes will also be banned for sale at pharmacies and other businesses where other tobacco sales are prohibited. Additionally, other cities in California including Los Angeles, Long Beach, and Richmond have passed ordinances restricting the usage of e-cigarettes in certain locations.

Other developed countries are also beating us to the punch – the European Parliament voted in February to limit the amount of nicotine in e-cigarettes to a 2 percent concentration which can cause a child to become sick, but rarely proves fatal. The EU will also now require packaging that is both childproof and tamperproof, warning labels that include information about addictiveness and toxicity, and it will also regulate the purity of the nicotine liquid that is used in the e-cigarette devices. Regulations from Canada are even stricter, classifying e-cigarettes and liquid nicotine under the same rules that govern the safety of drugs. This means that manufacturers in Canada must submit scientific evidence demonstrating safety, quality, and efficacy in order to sell their products.

The e-cigarette itself industry has also acknowledged that some set of regulations may even prove to be beneficial. One CEO estimated that approximately 1 to 2 million liters of e-liquids will be sold this year, and said that concentrations and purity of the substances produced are not always up to their standards if they come from outside the U.S., mainly in China. Another executive director was open to the idea of regulations relating to childproofing of bottles, warning labels, and manufacturing standards.

Additionally, although most e-liquids range between 1.8 and 2.4 percent concentrations, the fact that higher and deadlier concentrations of 7.2 or 10 percent are widely available on the Internet poses an additional cause for concern. Concentrations this high, according to experts in California, would take less than a tablespoon to prove lethal for an adult. In children, as little as a teaspoon can kill a small child.

It is in the public interest for this committee to hold a hearing to investigate the proper role of the FDA and Congress where it concerns the need for regulation of the e-cigarette industry. At the very least, issues such as marketing to children, the child-proofing of containers, and labeling requirements should be at the top of this discussion.

Thank you for your consideration of this matter. Should you have questions, please contact my staffer Molly Fishman at (202) 225-3531. I look forward to working with you to address this issue.

All the best,

Jackie Speier Member of Congress